

FORM TO BE USED BY A PRISONER IN FILING A CIVIL RIGHTS COMPLAINT

IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

NV-0868

(1) ZACHREY MARTZ ~~444~~
(Name of Plaintiff) (Inmate Number)FILED
SCRANTON

MAY 8-1 2019

301 MOREA RD FRACKVILLE PA 17932
(Address)(2) SP
(Name of Plaintiff) (Inmate Number)

3:19cv935

Per SP
DEPUTY CLERKSAME
(Address)

(Case Number)

(Each named party must be numbered,
and all names must be printed or typed)

JURY DEMAND

CIVIL COMPLAINT

vs.

(1) JOHN E. WETZEL

(2) THERESA DELBALSO

(3)
(Names of Defendants)(Each named party must be numbered,
and all names must be printed or typed)TO BE FILED UNDER: ~~42 U.S.C. § 1983 - STATE OFFICIALS~~~~28 U.S.C. § 1331 - FEDERAL OFFICIALS~~

MAIL

I. PREVIOUS LAWSUITS

- A. If you have filed any other lawsuits in federal court while a prisoner, please list the caption and case number including year, as well as the name of the judicial officer to whom it was assigned:

NONE

II. EXHAUSTION OF ADMINISTRATIVE REMEDIES

In order to proceed in federal court, you must fully exhaust any available administrative remedies as to each ground on which you request action.

- A. Is there a prisoner grievance procedure available at your present institution? ☒ Yes ☐ No
- B. Have you fully exhausted your available administrative remedies regarding each of your present claims? ☐ Yes ☒ No
- C. If your answer to "B" is Yes:

1. What steps did you take? _____

2. What was the result? _____

- D. If your answer to "B" is No, explain why not: I felt like I WAS going To BE Retatation on this ISSUE:

III. DEFENDANTS

(1) Name of first defendant: THERESE DELBALSO

Employed as Supt. at SCI MAHANAY

Mailing address: 301 MOREA RD FRACKVILLE PA 17932

(2) Name of second defendant: JOHN E. WETZEL

Employed as Doc SECRETARY at SECRETARY OF CORRECTIONS

Mailing address: 1920 Technology Parkway MECHANESBURG, PA. 17050

(3) Name of third defendant: _____

Employed as _____ at _____

Mailing address: _____

(List any additional defendants, their employment, and addresses on extra sheets if necessary)

IV. STATEMENT OF CLAIM

(State here as briefly as possible the facts of your case. Describe how each defendant is involved, including dates and places. Do not give any legal arguments or cite any cases or statutes. Attach no more than three extra sheets if necessary.)

1. All LAST year 2018 up To know All REGULAR MAIL Being Copied And there WASN'T Any ORIGINAL Copies that WAS sent BACK To ME OR destroyed

from SMARTCommunications. I WAS NEVER given

2. ANY VALID EVIDENCE that (my mail) WAS "Actually destroyed".

This violates PLAINLY, my "Constitutional Rights" Under "Fourth Amendment" .. → THE RIGHT OF THE PEOPLE

3. To BE Secured IN their Persons, houses, PAPERS AND EFFECTS AGAINST UNREASONABLE searches AND SEIZURES, shall NOT BE Violated .. ACT .. "FOURTEENTH AMEND" .. Nor BE Deprived OF Life, Liberty, OR Property, with out due Process OF LAW :

Nor shall Private Property BE TAKEN for PUBLIC USE, without JUST Compensation

- V. RELIEF EVEN MORE, "INVASION OF PRIVACY" violates my Constitutional Rights :

(State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.)

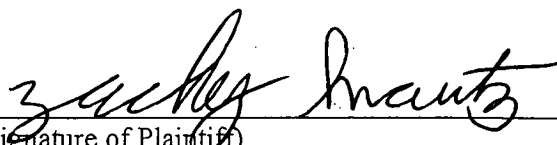
1. \$150,000.00 COMPENSATION

2. MY ORIGINAL MAIL BACK TO ME AND ORIGINAL PICTURES OR SEND BACK TO SADER.

3.

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 28th day of Tuesday, 2019.


(Signature of Plaintiff)

FORMS TO BE COMPLETED BY PRISONERS FILING A CIVIL RIGHTS
COMPLAINT UNDER 42 U.S.C. § 1983 or 28 U.S.C. § 1331

COVER SHEET

THIS COVER SHEET CONTAINS IMPORTANT INFORMATION ABOUT FILING A COMPLAINT AND YOUR OBLIGATIONS IF YOU DO FILE A COMPLAINT. READ AND COMPLETE THE COVER SHEET BEFORE YOU PROCEED FURTHER.

The cost for filing a civil rights complaint is \$350.00.

If you do not have sufficient funds to pay the full filing fee of \$350.00 you need permission to proceed in forma pauperis. However, the court will assess and, when funds exist, immediately collect an initial partial filing fee of 20 percent of the greater of:

- 1) the average monthly deposits to your prison account for the past six months; or
- 2) the average monthly balance in your prison account for the past six months.

Thereafter, the institution in which you are incarcerated will be required to make monthly payments of 20% of the preceding month's deposits credited to your account until the entire filing fee is paid.

CAUTION: YOUR OBLIGATION TO PAY THE FULL FILING FEE WILL CONTINUE REGARDLESS OF THE OUTCOME OF YOUR CASE, EVEN IF YOUR COMPLAINT IS DISMISSED BEFORE THE DEFENDANTS ARE SERVED.

1. You shall file a complaint by completing and signing the attached complaint form and mailing it to the Clerk of Court along with the full filing fee of \$350.00. (In the event attachments are needed to complete the allegations in the complaint, no more than three (3) pages of attachments will be allowed.) If you submit the full filing fee along with the complaint, you DO NOT have to complete the rest of the forms in this packet. Check here if you are submitting the filing fee with the complaint form. *Zachary Hays*

2. If you cannot afford to pay the fee, you may file a complaint under 28 U.S.C. § 1915 without paying the full filing fee at this time by completing the following: (1) Complaint Form; (2) Application To Proceed In Forma Pauperis; and (3) Authorization Form. You must properly complete, sign and submit all three standard forms or your complaint may be returned to you by the Clerk of Court. Check here if you are filing your complaint under 28 U.S.C. § 1915 without full prepayment of fees. *Zachary Hays*

Please Note: If your case is allowed to proceed and you are awarded compensatory damages against a correctional facility or an official or agent of a correctional facility, the damage award will first be used to satisfy any outstanding restitution orders pending. Before payment of any compensatory damages, reasonable attempts will be made to notify the victims of the crime for which you were convicted concerning payment of such damages. The restitution orders must be fully paid before any part of the award goes to you.

DO NOT DETACH THE COVER SHEET FROM THE REST OF THE FORMS

PA DOC

Zachary Martz

NO-0868

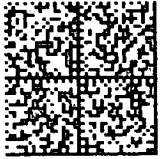
Po Box 33028

St. Petersburg, Florida.

33733

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INMATE MAIL
PA DEPT OF CORRECTIONS



U.S. POSTAGE



PITNEY BOWES
ZIP 17932 \$ 000.50⁰
02 4W
0000364159 MAY 29, 2019

Middle District of Pa.

To Clerk of Courts =

235 N. Washington Avenue

Scranton, Pa. 18501

RECEIVED
SCRANTON

MAY 31 2019

PER Am
DEPUTY CLERK

NewCase

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